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January 31, 2006

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1340

***Re: Revocation of Power of Attorney***

Dear Sir:

Please note that the Power of Attorney to Barnes & Thornburg, P.O. Box 2786, Chicago, IL 60690-2786, in the following applications has been revoked by Science Medicus, Inc.:

Application No.	Docket Ref
10/797,391	920607-95597
10/732,643	920607-95239
10/871,928	920607-95769
10/945,463	920607-97172
10/982,093	920607-97446
10/000,005	0607-1006
09/992,967	0607-1007

All pleadings and correspondence in the pending cases should accordingly be forwarded to:

Ralph C. Francis  
FRANCIS LAW GROUP  
1942 Embarcadero  
Oakland, CA 94606

Copies of duly filed Power of Attorney and Correspondence Address Indication Forms are enclosed herewith.

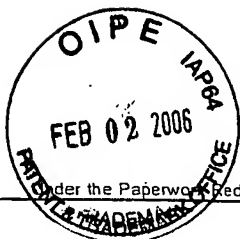
Thank you for your attention in this matter.

Respectfully Submitted,

Ralph C. Francis  
Reg. No. 38,884



Application S/N 10/797,391



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Approved for use through 11/30/2005. OMB 0651-0035  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	10/797,391
Filing Date	March 10, 2004
First Named Inventor	Eleanor Schuler
Title	See Appendix I
Art Unit	3762
Examiner Name	To be assigned
Attorney Docket Number	920607-95597

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☐ Practitioners associated with the Customer Number:  
OR

☒ Practitioner(s) named below:

Name	Registration Number
Ralph C. Francis	38,884

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:  
OR

☐ The address associated with Customer Number:  
OR

<input checked="" type="checkbox"/> Firm or Individual Name	Francis Law Group				
Address	1942 Embarcadero				
City	Oakland	State	CA	Zip	94606
Country	USA				
Telephone	(510) 533-1100	Fax	(510) 533-1106		

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature		Date	18 FEB 05
Name	Daniel S. Baillet	Telephone	(505) 944-0231
Title and Company	Vice President- Science Medicus, Inc.		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



## APPENDIX I

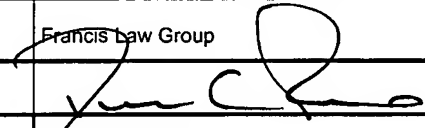
Title: Specific Method for Implantable  
Cardiac Control

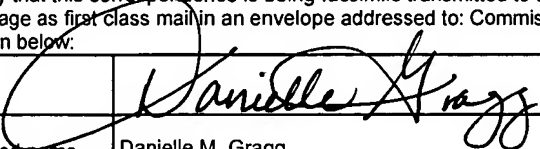
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10797391
	Filing Date	
	First Named Inventor	
	Art Unit	
	Examiner Name	
Total Number of Pages in This Submission	Attorney Docket Number	

*(Circular stamp: OIPE, FEB 02 2006, U.S. PATENT AND TRADEMARK OFFICE)*

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Miscellaneous Correspondence;
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	January 31, 2006 letter
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Francis Law Group		
Signature			
Printed name	Ralph C. Francis		
Date	January 31, 2006	Reg. No.	38,884

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Danielle M. Gragg	Date	01/31/06

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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